

PTO/SB/30 (04-05)

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Request For Continued Examination (RCE) Transmittal		Application Number	10/040,379
Address to: MS RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		Filing Date	January 9, 2002
		First Named Inventor	Takashi KONDO
		Art Unit	2162
		Examiner Name	H. Q. Pham
		Attorney Docket Number	245402004000
		This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.	

1. **Submission required under 37 CFR 1.114** Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).

a. Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.

i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____

ii. Other _____

b. Enclosed

i. Amendment/Reply iii. Information Disclosure Statement (IDS)

ii. Affidavit(s)/Declaration(s) iv. Other _____

2. **Miscellaneous**

a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)

b. Other _____

3. **Fees** The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.

a. The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments to Deposit Account No. 03-1952. I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.

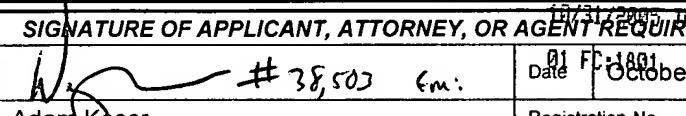
i. RCE fee required under 37 CFR 1.17(e)

ii. Extension of time fee (37 CFR 1.136 and 1.17)

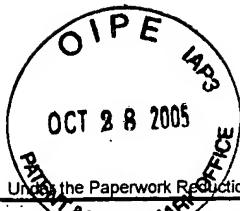
iii. Other _____

b. Check in the amount of \$ _____ enclosed

c. Payment by credit card (Form PTO-2038 enclosed)

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
Signature	 # 38,503 fm:		Date <u>01 OC 1801</u> <u>October 28, 2005 DA</u>
Name (Print/Type)	<u>Adam Keser</u>		Registration No. <u>54,217</u>

10040379



<p>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Effective on 12/08/2004.</p> <p>FEE TRANSMITTAL For FY 2005</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		<p>Complete if Known</p> <table border="1"> <tr> <td>Application Number</td> <td>10/040,379</td> </tr> <tr> <td>Filing Date</td> <td>January 9, 2002</td> </tr> <tr> <td>First Named Inventor</td> <td>Takashi KONDO</td> </tr> <tr> <td>Examiner Name</td> <td>H. Phan</td> </tr> <tr> <td>Art Unit</td> <td>2162</td> </tr> <tr> <td>TOTAL AMOUNT OF PAYMENT</td> <td>(\$ 790.00)</td> </tr> <tr> <td>Attorney Docket No.</td> <td>245402004000</td> </tr> </table>		Application Number	10/040,379	Filing Date	January 9, 2002	First Named Inventor	Takashi KONDO	Examiner Name	H. Phan	Art Unit	2162	TOTAL AMOUNT OF PAYMENT	(\$ 790.00)	Attorney Docket No.	245402004000
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<p>METHOD OF PAYMENT (check all that apply)</p> <p><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____</p> <p><input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP</p> <p>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)</p> <p><input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee</p> <p><input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments</p>					
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<p>FEE CALCULATION</p> <p>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</p> <table border="1"> <thead> <tr> <th rowspan="2"><u>Application Type</u></th> <th colspan="2"><u>FILING FEES</u></th> <th colspan="2"><u>SEARCH FEES</u></th> <th colspan="3"><u>EXAMINATION FEES</u></th> </tr> <tr> <th><u>Fee (\$)</u></th> <th><u>Small Entity</u></th> <th><u>Fee (\$)</u></th> <th><u>Small Entity</u></th> <th><u>Fee (\$)</u></th> <th><u>Small Entity</u></th> <th><u>Fees Paid (\$)</u></th> </tr> </thead> <tbody> <tr> <td>Utility</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>200</td> <td>100</td> <td>_____</td> </tr> <tr> <td>Design</td> <td>200</td> <td>100</td> <td>100</td> <td>50</td> <td>130</td> <td>65</td> <td>_____</td> </tr> <tr> <td>Plant</td> <td>200</td> <td>100</td> <td>300</td> <td>150</td> <td>160</td> <td>80</td> <td>_____</td> </tr> <tr> <td>Reissue</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>600</td> <td>300</td> <td>_____</td> </tr> <tr> <td>Provisional</td> <td>200</td> <td>100</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>_____</td> </tr> </tbody> </table> <p>2. EXCESS CLAIM FEES</p> <p>Fee Description</p> <table border="1"> <tr> <td>Each claim over 20 (including Reissues)</td> <td><u>Fee (\$)</u></td> <td><u>Small Entity</u></td> </tr> <tr> <td>50</td> <td>25</td> <td></td> </tr> <tr> <td>Each independent claim over 3 (including Reissues)</td> <td>200</td> <td>100</td> </tr> <tr> <td>Multiple dependent claims</td> <td>360</td> <td>180</td> </tr> </table> <table border="1"> <tr> <td><u>Total Claims</u></td> <td><u>Extra Claims</u></td> <td><u>Fee (\$)</u></td> <td><u>Fee Paid (\$)</u></td> <td><u>Multiple Dependent Claims</u></td> </tr> <tr> <td>16</td> <td>- 20 = 0</td> <td>x 0</td> <td>= 0</td> <td><u>Fee (\$)</u> <u>Fee Paid (\$)</u></td> </tr> </table> <table border="1"> <tr> <td><u>Indep. Claims</u></td> <td><u>Extra Claims</u></td> <td><u>Fee (\$)</u></td> <td><u>Fee Paid (\$)</u></td> </tr> <tr> <td>1</td> <td>- 3 = 0</td> <td>x 0</td> <td>= 0</td> <td>_____</td> </tr> </table> <p>3. APPLICATION SIZE FEE</p> <p>If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).</p> <table border="1"> <tr> <td><u>Total Sheets</u></td> <td><u>Extra Sheets</u></td> <td><u>Number of each additional 50 or fraction thereof</u></td> <td><u>Fee (\$)</u></td> <td><u>Fee Paid (\$)</u></td> </tr> <tr> <td>_____</td> <td>- 100 = _____</td> <td>/50 (round up to a whole number) x _____</td> <td>= _____</td> <td><u>Fees Paid (\$)</u></td> </tr> </table> <p>4. OTHER FEE(S)</p> <p>Non-English Specification, \$130 fee (no small entity discount)</p> <p>Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ... 790.00)</p>								<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>			<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fees Paid (\$)</u>	Utility	300	150	500	250	200	100	_____	Design	200	100	100	50	130	65	_____	Plant	200	100	300	150	160	80	_____	Reissue	300	150	500	250	600	300	_____	Provisional	200	100	0	0	0	0	_____	Each claim over 20 (including Reissues)	<u>Fee (\$)</u>	<u>Small Entity</u>	50	25		Each independent claim over 3 (including Reissues)	200	100	Multiple dependent claims	360	180	<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	16	- 20 = 0	x 0	= 0	<u>Fee (\$)</u> <u>Fee Paid (\$)</u>	<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	1	- 3 = 0	x 0	= 0	_____	<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	_____	- 100 = _____	/50 (round up to a whole number) x _____	= _____	<u>Fees Paid (\$)</u>
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<p>SUBMITTED BY</p> <p><i>1801 Request for continued examination (RCE) (see 37 ... 790.00)</i></p> <p>Signature: <i>Adam Keser</i></p> <p>Name (Print/Type): Adam Keser</p>				
Signature	<i>Adam Keser</i>	Registration No. (Attorney/Agent)	54,217	Telephone (703) 760-7301
		Date	October 28, 2005	